Passport-sized Photo

**Application Form**

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| **Personal Detail** | | | | |
| **First(Given) Name** | **Middle Name** | **Last(Family) Name** | | |
|  |  |  | | |
| **Date of Birth** | DD / MM / YYYY | **Gender** | □Male □Female | |
| **Nationality** |  | | | |
| **Mailing Address** |  | | | |
|  | | | | |
| **Email Address** |  | | | |
| **Telephone** |  | **Fax** | |  |
| **Passport Number** |  | **Valid Date** | | DD / MM / YYYY |

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| **Current Enrollment Detail** | | | |
| **Home University** | University of Brawijaya | | |
| **Mailing Address of Home University** | Jalan Mayjen Haryono No. 165, Malang East Java, Indonesia, 65145 | | |
| **Major (Minor)** |  | | |
| **Year Level** |  | **Student ID Number** |  |

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| **Home University Approval** | | | |
| **Name of Office** | International Undergraduate Program, Faculty of Economics and Business | | |
| **Name of Person in Charge** | Rahma Ayu Puspita | | |
| **Mailing Address\*** | Jalan Mayjen Haryono No. 165, Malang East Java, Indonesia, 65145 | | |
|  | | | |
| **Email Address** | [iup.feb@ub.ac.id](mailto:iup.feb@ub.ac.id) or [febub.iup@gmail.com](mailto:febub.iup@gmail.com) | | |
| **Telephone** | +62 341 551396 | **Fax** | +62 341 553834 |

\* The original transcript will be sent to the mailing address aboveafter the program ends.

|  |  |  |  |
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| **Emergency Contact** | | | |
| **Name of Person** |  | | |
| **Relationship** |  | | |
| **Phone Number (Cell phone)** | + (Cell phone : + ) | | |
| **Email Address** |  | | |
| **Telephone** |  | **Fax** |  |
| **Signature** |  | **Date** | DD / MM / YYYY |

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|  |  | **Course Registration** | | |  |
| **Courses** | **Tick your selection(√)**  **the box below** | | **Credit(s)** | **Type** | **Time** |
| **Korean Language** |  | | **3** | **Optional** | **Morning** |
| **Korean Culture** |  | | **3** |
| **Introduction to Sailing Yacht**  **(Practical Training)** |  | | **2** |
| **Understanding of International Relations** |  | | **3** |
| **Global Culture** |  | | **1** | **Mandatory** | **Afternoon** |

\*Participants can select up to 2 classes - one optional and one mandatory.

\*1 Credit is equivalent to 15 hours of work.

|  |  |
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| **Accommodation** | |
| **On-campus Dormitory**  (Twin room) | □ Yes  □ No (I will look for my own accommodation) |

Check-in 2 July 2017 / Check-out 22 July 2017

\*Dormitory is not available before 2 July and after 22 July

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| **Declaration** | | | |
| I confirm that the information I have given is correct to the best of my knowledge. | | | |
| **Signature** |  | **Date** | DD / MM / YYYY |

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| **Check List** |
| □ Application form with a photo(passport size) attached  □ Aproof of student registration  □ An official academic transcript  □Health check result  (It must prove that you don’t have any contagious diseases such as tuberculosis or hepatitis)  □ A copy of the first two pages of the passport  □ A copy of certificate of medical insurance coverage |